

Title: March Madness - Coding Nightmares

Session: **W-6-1100**



Objectives

- Understand industry initiatives expediting the EHR
- Copy/Paste Functionality on the LEHR
- Recognize and Acknowledge HIM Leadership and Operational Challenges
- Identify Best Practices



Agenda

- AHIMA Toolkit Overview
- HIM Leadership with Copy/Paste
- Operational Management of Copy/Paste Issues
- Sample Exercise
- Question and Answers



- HIM professional responsibilities
- Ensure quality, timely and accurate documentation
- Sufficient knowledge of system capabilities
- Manage copy functionality

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- Content
- Risks associated with functionality
- Inaccurate information
- Inability to identify author
- Inability to defend
- Appropriate use
- Stable over time
- Clearly distinguishable
- Is auditable

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- Content
- Fraud and Abuse
- Billing Concerns
- Guidelines
- Reporting
- Clinical Trustworthiness
- Legal purposes
- Clinical purposes

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- Content
- Education and Training
- Provider Training
- Risk Managers
- Legal Counsel
- HIM Staff



HIM Leadership with Copy/Paste

- Are there alternatives to use of copy functionality?
- How do we ensure user competency?
- What copy functionality exists within the EHR including the ability to make corrections?
- What will be our process to mitigate and identify unacceptable uses?
- Who is going to enforce the policies?



HIM Software Questions

- How are chart errors identified and corrected?
- What audit trails are available?
- Is copied information easily identified?
- Are blocks of content individually authenticated?
- How is re-authenticated information identified?
- How are source documents identified?



HIM Understanding EHR Functionality

- Attributes of the copied material
- Limits within a patient record
- Correction functionality
- Output or view of the copied material
- Audit trial functionality
- Assignment of use



HIM Leadership with Copy/Paste

- HIM Leadership to develop policies surrounding copy/paste
- HIM should be resource to understand payer concerns/rules re: copy/paste
- Partner with medical staff leaders to address issue



HIM with Copy/Paste

- Define limitations of copy/paste
- Ensure compliance via auditing; i.e., use all of your HIM eyes to assist-coders, analysts, etc.
- Address significant issues through HIM Committee or PI processes



Avoid Copy/Paste if Possible

- One of the advantages of EMR is ability to reduce MD work load
- Partner with MDs and IT to develop faster methods to document
- Lead evaluation of different methods to reduce documentation time
- Solidify HIM as a leader



Inappropriate Use

- Copying problems that are no longer active
- Copying medications that are no longer current
- Up-coding
- Not identifying author



Alternatives to Cut/Paste

- Templates
- Dictation (2-hour turnaround)
- Scribes; i.e., residents
- Develop structured rounding notes; i.e., preloaded with last 24 hours of lab/meds/rads
- Use of pull forward data with ability to subtract/update data
- Build in "sign off" that data is now current
- Make it easy to do it right the first time
- How many clicks does it take?



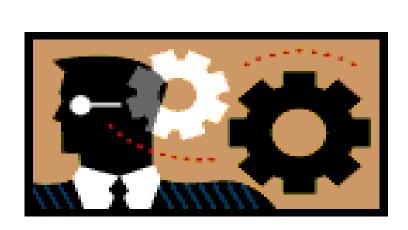
HIM Management of Copy/Paste

- Investigate/Troubleshoot
- Audit
- Report Findings
- Guidelines (set Policies/Procedures)
- Educate HIM staff
- Train physicians, nurses, techs



Create a Tool to Assist with Investigation

- Identify statement of issue
- Identify concerns
- Identify information yielded from investigs
- Identify your root cause of issue
- Make recommendations for resolve







Auditing

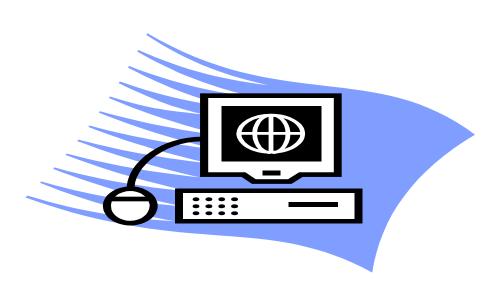
- How do you copy/paste in your EHR?
- Determine how this is done
- Is there an audit field available?
- Is the audit field turned on?





Audits

- Perform random audits
- Use
- Compliance staff
- Coders
- Medical Record Reviewers; i.e., analyzers, auditors.





Guidelines (Policy/Procedures)

- Organizational use
- System specific use
- System selection criteria
- Sanctions–Rules and Regulations
- Corrections
- General and copy/paste
- Be selective in copying/pasting into the HER
- The individual performing the copy/paste is responsible for the documentation regardless of who authored the original information.



Training

- How to document
- Good workflows
- Clear understanding of what needs to be captured
- What can be brought forward
- Partner with medical staff leaders to address
- Teach practitioners/students that careless copying creates untrustworthy records



Questions

- Scenarios
- Questions



